



City of Crossville
Building Code Board of Appeals
Application

Application Date: _____

Appellant Information:

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone Number _____

Permit Number: _____

Project Address: _____

Date on which the decision being appealed was rendered _____

In accordance with Crossville Municipal Code the appeal shall be made
in writing within 30 business days after notice has been served.

1. Describe the type interest you have in the subject property, e.g. owner,
contractor, applicant:

2. Describe the specific decision(s) or interpretation(s) that you are
appealing:

3. Describe the basis upon which you believe the decision(s) and/or interpretation(s) are in error.

4. Provide Pictures, supporting documents/ files, code references, etc. pertaining to your claim.

Applicants signature:

Applicants printed name:

The applicant shall pay a filing fee of one hundred dollar (\$100.00) when submitting the application.